Telecommunications Carriers

AUTHORIZED UTILITY REPRESENTATIVE FORM

CERTIFICATED COMPANY INFORMATION

Company Name: SkyBest Communications, Inc.

FEIN/SSN:

DBA/FKA:

City: West Jefferson

Mailing Address: PO Box 759

State: NC

Telephone #336-877-1350

ILEC

IXC

CLEC XX

Wireless ETC

REGISTERED AGENT INFORMATION

Registered Agent: Margaret M. Fox Mailing Address: PO Box 11390

City: Columbia

State: sc

ZIP Code: 29211

ZIP Code: 28694

As required by Commission rules and regulations Print or type company contact person and contact information for the areas listed below:

UTILITY REPRESENTATIVE INFORMATION

General Manager

Name: Kim Shepherd Address: PO Box 759

City: West Jefferson

State: NC

ZIP Code: 28694

Phone: 336-877-1350

Email: kim.shepherd@skyline.org

Fax: 336-877-2020

Emergency Contact - Non Office Hours

Name: Greg Pritchard

Phone: 864.921.4170

Email: gregory.pritchard@skyline.org

Fax: 336-877-2020

Customer Relations/Complaints Rep

Name: Jamey Jenkins Address: PO Box 759

City: West Jefferson

State: NC

ZIP Code: 28694

Phone: 336-876-6279

Email: jamey.jenkins@skyline.org

Fax: 336-877-2020

Complaints Rep for Complaint Escalation

Name: Brian Tester Address: PO Box 759

City: West Jefferson

Phone: 336-876-6549

State: NC Email: brian.tester@skyline.org ZIP Code: 28694 Fax: 336-877-2020

Customer Toll Free Contact Number: 800-759-2226

Engineering Operations

Name: Robbie Farmer Address: PO Box 759

City: West Jefferson

State: NC Phone: 336-876-6281 Email: robbie.farmer@skyline.org ZIP Code: 28694

Fax: 336-877-2020

Test and Repair Name: Arianne Hurtado

Address: 208 S. Alabama Ave.

City: Chesnee Phone: 864-461-2211

State: SC Email: arianne.hurtado@skyline.org ZIP Code: 29323

Fax: 336-877-2020

UTILITY REPRESENTATIVE INFORMATION

Regulatory Officer

Name & Title: Steven Hardin, Regulatory Manager

Address: PO Box 759

City: West Jefferson State: NC ZIP Code: 28694

Phone: 336-877-1350 Email: steven.hardin@skyline.org Fax: 336-877-2020

Annual Report Form Mailings

Name & Title: Pam Weaver, Executive Assistant

Address: PO Box 759

City: West Jefferson State: NC ZIP Code: 28694

Phone: 336-876-6151 Email: pam.weaver@skyline.org Fax: 336-877-2020

Dual Party Invoice Mailings

Name & Title: Laura Shepherd, Accounting Manager

Address: PO Box 759

City: West Jefferson State: NC ZIP Code: 28694
Phone: 336-877-1350 Email: laura.shepherd@skyline.org Fax: 336-877-2020

Universal Service Fund Mailings

Name & Title: Laura Shepherd, Accounting Manager

Address: PO Box 759

City: West Jefferson State: NC ZIP Code: 28694
Phone: 336-877-1350 Email: |aura_shepherd@skyline.org Fax: 336-877-2020

Gross Receipts Mailings

Name & Title: Laura Shepherd, Accounting Manager

Address: PO Box 759

City: West Jefferson State: NC ZIP Code: 28694
Phone: 336-877-1350 Email: laura.shepherd@skyline.org Fax: 336-877-2020

Lifeline Contact

Name & Title: Angie Poe, Customer Service Manager

Address: PO Box 759

City: West Jefferson State: NC ZIP Code: 28694

Phone: 336-877-1350 Email: angie.poe@skyline.org Fax: 336-877-2020

FORM PREPARER INFORMATION

This form was completed by: Steven Hardin

Signature:

Title: Regulatory Manager Date: 2/14/2019

RETURN COMPLETED FORM TO:

Public Service Commission of SC

Docketing Department

101 Executive Center Drive, Suite 100

Columbia, SC 29210

Office of Regulatory Staff

AND Attn. Kari Munn

1401 Main Street, Suite 800

Columbia, SC 29201